FORT HAYS STATE UNIVERSITY
Office of the Registrar – Fort Hays State University
600 Park Street – Hays, KS 67601-4099
1-800-628-FHSU or (785) 628-4222
The application for admission is also available online at www.fhsu.edu/admissions.

APPLICATION FOR UNDERGRADUATE ADMISSION

PERSONAL INFORMATION: (Please TYPE or PRINT all items)

1. Legal name: LAST FIRST MIDDLE MAIDEN PREVIOUS NAMES

2. Mailing address: STREET CITY/STATE ZIP CODE COUNTRY

E-mail address

Home phone number w/area code ( ) Cell phone number w/area code ( )

Questions regarding gender and race are optional. This information assists in ensuring equal educational opportunities.

3. Gender: □ Male □ Female

4. Ethnicity: Are you Hispanic or Latino (Spanish Origin)? □ Yes □ No
   (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

All applicants, including Hispanic or Latino, must select one or more races from the following five racial groups:

□ American Indian or Alaska Native
   (A person having origins in any of the original peoples of North and South America, including Central America, and who maintains a tribal affiliation or community attachment)

□ Asian
   (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam)

□ Black or African American
   (A person having origins in any of the black racial groups of Africa)

□ Native Hawaiian or Other Pacific Islander
   (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands)

□ White
   (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa)

5. Social Security Number: ———— ———— (REQUIRED)
   You must provide your social security number as part of the application process. Your social security number will not be released to agencies outside the university and it will not be used as your student identification number. You will be assigned a random eight digit Fort Hays State University student identification number when we process your application.

6. Date of birth ______/_____/______ Place of birth ______________________

MTH DAY YR CITY STATE

7. Date you wish to enroll: □ Fall (August) □ Spring (January) □ Summer (June-July) Year ______
   Select One: I will be an: □ On-Campus Student □ Virtual College Student

8. Do you plan to earn a degree from FHSU? □ Yes □ No
   If yes, indicate major you wish to study: ____________________________ (Please refer to University Catalog)

9. Parent(s) or guardian(s) name □ Mr. □ Ms. □ Mr. & Mrs. FIRST MIDDLE LAST

Parent address ____________________________________________

STREET OR BOX NUMBER CITY/STATE ZIP CODE PHONE NUMBER

10. Name of hometown newspaper (where you wish your news to appear) ____________________________

NEWSPAPER CITY STATE

11. First Generation College Student Information: Which best describes the level of education attained by your parents?
   A. Both parents have a high school diploma or less. □
   B. One or both parents have some college experience but neither have attained a bachelor’s degree. □
   C. One or both parents have earned a bachelor’s degree or higher. □
RESIDENCY:
12. Are you a U.S. citizen? ☐ Yes ☐ No If no, country of citizenship ____________________________
If you are a permanent resident alien, please provide your alien registration number:
You must provide a copy of your alien registration card to the FHSU Registrar’s Office.

13. Are you a resident of the state of Kansas? ☐ Yes ☐ No
If yes, when did you begin living continuously in Kansas? ___________/_________/_________ MONTH DAY YEAR

14. Are you currently, or have you ever been, on full-time active duty military service? ☐ Yes ☐ No
If yes, which branch? ____________________________
If yes, give dates of service ___________/_________/_________ to ___________/_________/_________ If yes, which base?

If on active duty, is your duty station Kansas? ☐ Yes ☐ No
Are you a dependent or spouse of an active full-time military person? ☐ Yes ☐ No
Are you or your spouse an employee of a Kansas State university or are you a dependent of one? ☐ Yes ☐ No
Will you or your spouse or your parents move to Kansas as a result of a job transfer or job recruitment before you enter FHSU? ☐ Yes ☐ No

HIGH SCHOOL INFORMATION:
(All freshmen are required to have a high school transcript or GED on file with their application)

15. High School
NAME OF HIGH SCHOOL ____________________________
Are you a high school graduate? ☐ Yes ☐ No
Actual or expected date of graduation ____________________________
Municipality ____________________________ State ____________________________

Do you have a GED? ☐ Yes ☐ No
If yes, date GED was awarded ____________________________
If you have a GED, please submit a copy of your GED certificate.

Date you completed or plan to complete the ACT ____________________________
All freshmen under the age of 21 must complete the American College Test Assessment (ACT) to be advised and select classes.

TRANSFER SCHOOL INFORMATION:
You are required to list all colleges previously attended and, if currently enrolled, the college you are currently attending. Request each institution to mail official transcripts to the Registrar, Fort Hays State University. If currently enrolled, a final transcript must also be mailed to the Registrar’s Office at the conclusion of the semester.

16. List all colleges/universities attended even if no credit was earned.

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<th>Name of Institution</th>
<th>City and State</th>
<th>Dates of Attendance</th>
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17. Application fee: For admission, send $30 ($50 for international students) non-refundable application fee. Send a check or money order payable to Fort Hays State University, Registrar’s Office, 600 Park Street, Hays, KS 67601-4099, or Visa, MasterCard, Discover or American Express number and expiration date. DO NOT SEND CASH.

☐ Visa ☐ MasterCard ☐ Discover ☐ American Express
Card number ____________________________ Exp. _______/_______
Cardholder name ____________________________ Card security code ____________________________

18. Required signature: I certify the information provided in this application is true and accurate without evasion or misrepresentation. I understand that this application is a legally binding document and if this information is found to be false or misleading, this fact alone will be sufficient cause for my admission to be revoked and my enrollment to be cancelled. I understand and agree that the laws of the State of Kansas apply to any dispute between me and Fort Hays State University arising out of any and all aspects of my education through FHSU, and that Kansas courts shall have exclusive jurisdiction over any lawsuit brought by either FHSU or me arising out of any aspect of my education at Fort Hays State University.

Signature ____________________________ Date ____________________________